Career Skill Program (CSP) Employer's Checklist

Part I: Administrative Data

2. Type of CSP: Employment Skills Training Job Shadowing Internship Pre-Apprenticeship/Apprenticeship Credentialing On-The-Job Training (OJT) 3. Accrediting or Approving Authority: U. S. Department of Veterans Affairs National Association of State Approving Agencies U. S. Department of Labor U. S. Department of Education American National Standards Institute (ANSI) Council on Occupational Education Not accredited or approved Other (please state): 4. CSP Training Provider(s) and Contact Personnel: (Provide contact information for all CSP Partners to include Employer and Institute of Higher Learning (IHL) POCs if different than CSP Provider.) Company Name: Address: POC: Phone Number: Email: Company Name: Address: POC: Phone Number: Email: Email	1.	Name of CSP:			
Internship	2.	Type of CSP:			
□ U. S. Department of Veterans Affairs □ National Association of State Approving Agencies □ U. S. Department of Labor □ U. S. Department of Education □ American National Standards Institute (ANSI) □ Council on Occupational Education □ Not accredited or approved □ Other (please state): 4. CSP Training Provider(s) and Contact Personnel: (Provide contact information for all CSP Partners to include Employer and Institute of Higher Learning (IHL) POCs if different than CSP Provider.) Company Name: Address: POC: Phone Number: Email: Company Name: Address: POC: Phone Number: Company Name: Address: POC: Phone Number: POC: Phone Number:		☐ Internship ☐ Pre-Apprenticeship/Apprenticeship			
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Address:POC:Phone Number:	Ac PC Ph	ddress:			
	Ac PC	ddress:			

	election Criteria (de or meeting installati	_	arrison determined	this partner was
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6. CSP Traini	ing Program Dates	·		
Cohort #	Start Date	Finish Date	Length of Training (# weeks)	# Service members per Cohort
	+			
offer CSPs to Sol	diers based on the	eir availability; not	ining providers the as part of a group so will accommodate	with defined

7. I	Physical Address/Location where CSP training will be conducted:
Part II:	CSP Scope (Attach the curriculum or program guide, and training schedule.)
1. Ove	erview of Program (description):
2. Pro	gram Purpose/Outcome:
(e.g. cr	edential earned, guaranteed interview, job placement, etc.):
3. Pro	gram Objective(s):
	e general training topics that will provide the knowledge, skills, and abilities
	needed by the participants to be qualified for employment in the CSP ated occupation area. KSAs may be included as an attachment.)

	cipant skill acquisition measured by: (may select more than one) Written test Performance-based test Other:
(http://w	dard Occupation Classification (SOC) Major Group of the CSP Training: ww.onetonline.org/find/family) Architecture and Engineering (17-0000) Arts, Design, Entertainment, Sports, and Media (27-0000) Building and Grounds Cleaning and Maintenance (37-0000) Business and Financial Operations (13-0000) Community and Social Services (21-0000) Computer and Mathematical (15-0000) Construction and Extraction (47-0000) Education, Training, and Library (25-0000) Farming, Fishing, and Forestry (45-0000) Food Preparation and Serving Related (35-0000) Healthcare Practitioners and Technical (29-0000) Healthcare Support (31-0000) Installation, Maintenance, and Repair (49-0000) Legal (23-0000) Life, Physical, and Social Science (19-0000) Management (11-0000) Office and Administrative Support (43-0000) Personal Care and Service (39-0000) Production (51-0000) Protective Services (33-0000) Sales and Related (41-0000) Transportation and Material Moving (53-0000)

Part III: CSP Participant Selection

1.	Describe the training provider's selection criteria for participants:
	"At-risk" Participants (Participants considered to be "at-risk" as defined by AR 1 are: 18-24 years of age, first term enlistments, involuntarily separating due to shaping, rapid separation from active duty, or medical separations.)
a.	Are the target participants considered to be "at-risk"? ☐ Yes ☐ No
b.	If "no", provide a description of the population to be trained:

Part IV: Resources

1. What is/are the expected funding source(s) to support the training?
Union Trust FundFederal or State GrantGI Bill (provide amount of benefits required):
Other (please explain):
2.Total cost of the program to the participant (per participant):
3. Will Soldiers be expected to pay any out-of-pocket expenses (e.g. tools, equipment, certification, or test fees) for this training?
☐ Yes ☐ No
If yes, list in detail the expenses which participants are responsible for paying:
4.Exclusions. List other required activities or resources, and describe if training provide or participant is providing. (e.g. transportation, housing, etc.):
5. Is this CSP open to PTDY applicants from other installations? Yes No
6. If yes, how many seats per cohort are open to PTDY participants?

Part V: Return on Investment (ROI)

. Describe how this CSP will connect participants to post-service employmer	nt:
Success of program is measured by: % participant completion rate % referred for job interviews % placed into employment	
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3. The training prepares participants for the following specific occupations. Provide the top 3. Specific occupations can be found at http://www.onetonline.org/help/online/browse_family

DOL-SOC Code	Occupation Title	Bright Outlook	Projected Growth

Bright Outlook occupations are expected to grow rapidly in the next several years, will have large numbers of job openings, or are new and emerging occupations.

<u>4. </u>	Additional Comments:	